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7/20/2005 2:23 PM PAGE 6/029
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From-Thelen, Reid, & Priest LLP

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T-922 P.005/028 F-105

JUL 20 2005

Docket No. 034300-000544

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Paul A. Nysen
APPLICATION NO.: 10/761,121
FILING DATE: January 20, 2004
TITLE: MULT-BAND ANTENNA SYSTEM
EXAMINER: Hung T. Vy
ART UNIT: 2821

CERTIFICATE OF MAILING

I hereby certify that this paper is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to:
Mail Stop Amendment, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, on the date printed below:

Date:

7/5/05

Name:

Michelle R. Crosby

Mail Stop Amendment
Commissioner for Patents
P. O. BOX 1450
Alexandria, VA 22313-1450

AMENDMENT

In response to the Office Action mailed April 5, 2005, please amend the above-identified patent application as follows.

Amendments to the Claims are reflected in the listing of claims that begins on page 2 of this paper.

Remarks/Arguments begin on page 10 of this paper.

07/21/2005 FFANAEIA 00000084 501698 10761121
01 FC:1202 350.00 DA

Void date: 07/21/2005 FFANAEIA
07/21/2005 FFANAEIA 00000084 501698 10761121
01 FC:1202 350.00 CR

Page 1 of 24

PAGE 6/29 * RCVD AT 7/20/2005 2:23:50 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-6/31 * DNIS:2738300 * CSID:USPTO * DURATION (mm-ss):07-40

07/21/2005 FFANAEIA 00000085 501698 10761621
01 FC:1202 350.00 DA

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07-20-05 09:59 From: Thelen, Reid, & Priest LLP

T-922 P.001 F-105

Thelen Reid & Priest LLP
Attorneys At Law

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F A X C O V E R P A G E

TO: **Examiner Hung T. Vy** FAX: 571.273.1954 DATE: July 20, 2005
USPTO PHONE: 571.272.1954

FROM: William E. Winters FAX: 408.287.8040 TOTAL PAGES: 28
PHONE: 408.292.5800 (including cover page)

E-MAIL: wwinters@thelenreid.com

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Date: July 20, 2005

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Michelle R. Crosby

Re: Serial Number 10/761,621

Dear Mr. Vy:

Attached is a copy of our response amendment we submitted on July 5, 2005 to the PTO. The amendment is a response to your Office Action dated April 5, 2005.


As you can see I inadvertently enter the incorrect serial number on each piece of paper that required the number.

I entered 10/761,121 when I should have entered 10/761,621.

I have discussed this with your supervisor Don Wong (because you were out) and he believes you should be able to except our filing and the filing date by making the correction to the copy on your end and resubmitting it for us.

Please confirm our response will be entered.

Best regards,


Michelle R. Crosby for William E. Winters

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From: Thelen, Reid, & Priest LLP

T-822

P.002

F-105

Serial/Patent No.: 10/761,121

Filing/Issue Date:

1-20-2004

Applicant: Paul A. Nysen

Title: MULT-BAND ANTENNA SYSTEM

TRP Docket No.: 034300-544

Atty/Secy Initials: WEW/ms

Date Mailed: 7/5/05

Docket Due Date: 7/5/05

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

- | | |
|---|---|
| <ul style="list-style-type: none"><input checked="" type="checkbox"/> Amendment/Response (24 pgs.)<input type="checkbox"/> Appeal Brief (____ pgs.) (in triplicate)<input type="checkbox"/> Application - Utility (____ pgs. with cover & abstract)<input type="checkbox"/> Application - Rule 1.53(b) Continuation (____ pgs.)<input type="checkbox"/> Application - Rule 1.53(b) Division (____ pgs.)<input type="checkbox"/> Application - Rule 1.53(b) CIP (____ pgs.)<input type="checkbox"/> Application - Rule 1.53(d) CPA (____ pgs.)<input type="checkbox"/> Application - PCT (____ pgs.)<input type="checkbox"/> Application - Provisional (____ pgs.)<input type="checkbox"/> Assignment and Cover Sheet<input type="checkbox"/> Certificate of Correction<input checked="" type="checkbox"/> Certificate of Mailing<input type="checkbox"/> Declaration & POA (____ pgs.)<input checked="" type="checkbox"/> Fee Transmittal<input type="checkbox"/> Drawings (informal):
____ # of sheets includes ____ figures<input type="checkbox"/> Other: | <ul style="list-style-type: none"><input type="checkbox"/> IDS & PTO 1449 (____ pgs.)<input type="checkbox"/> Pieces of Prior Art Enclosed<input type="checkbox"/> Issue Fee Transmittal<input type="checkbox"/> Submission of Formal Drawings:
____ # of sheets includes ____ figures<input type="checkbox"/> Notice of Appeal<input checked="" type="checkbox"/> Postcard<input type="checkbox"/> Preliminary Amendment (____ pgs.)<input type="checkbox"/> Reply Brief (____ pgs.)<input type="checkbox"/> Req and Cert. Not to Publish - Rule 1.213<input type="checkbox"/> Request for Continued Examination (RCE) (____ pgs.)<input type="checkbox"/> Request for Extension of Time ____ Month(s)<input type="checkbox"/> Response to Notice to File Missing Parts<input type="checkbox"/> Copy of PTO Notice to File Missing Parts<input checked="" type="checkbox"/> Transmittal Letter (original & copy)<input type="checkbox"/> Express Mail No.: ____<input type="checkbox"/> Check(s) \$ ____<input checked="" type="checkbox"/> Deposit Acct. No. 50-1698 \$3350.00Patent Code: 705-1202Client/Matter # ____ |
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PTO/SB/21 (09-04)

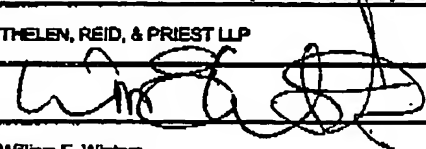
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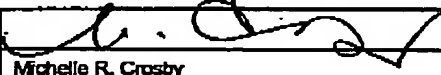
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/761,121	
	Filing Date	January 20, 2004	
	First Named Inventor	Paul A. Nysen	
	Art Unit	2821	
	Examiner Name	Hung T. Vy	
Total Number of Pages in This Submission	27	Attorney Docket Number	034300-000544

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	THELEN, REID, & PRIEST LLP		
Signature			
Printed Name	William E. Winters		
Date	JULY 5, 2005	Reg. No.	42,232

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Michelle R. Crosby	Date	July 5, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04V2)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL for FY 2005		Application Number	10781,121
		Filing Date	January 20, 2004
		First Named Inventor	Paul A. Nysen
		Examiner Name	Hung T. Vy
		Art Unit	2821
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	034300-000544
TOTAL AMOUNT OF PAYMENT		(\$) 350.00	

METHOD OF PAYMENT (check all that apply)

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- Under 37 CFR 1.16 and 1.17

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 30 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
39	-31 or HP= 7	x 50 = 350.00
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims	Extra Claims	Fee (\$)
_____	- 3 or HP= _____	x _____ = _____
HP = highest number of independent claims paid for, if greater than 3.		

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).


Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	- 100 = _____	/ 50 = _____ (round up to a whole number) x	_____	_____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	42,232	Telephone	408-282-5800
Name (Print/Type)	William E. Wilmar	Date	JULY 5, 2005		

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